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# A STUDY OF THE PHYSICAL CONDITION OF ONE THOUSAND DELINQUENTS SEEN IN COURT

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The original purpose of this study was to determine what part—if any—routine physical examinations may play in the disposition of a delinquent's case in court, and later in the institution of reconstructive measures while on probation. Such a consideration seemed clearly worth while, particularly in view of an ever widening scope of interest manifested by the court in the needs, as well as the deeds, of the individual delinquent.

The old and archaic conception of the judicial function was one limited purely to the determination of guilt or innocence; and in case of guilt, the imposition of fines and sentences has fortunately disappeared along with other equally archaic and fruitless theories. In its stead we have come to realize that the essential problem facing the court in connection with any individual who has offended against the law and order of society is the problem of readjusting that person to society.

It needs little argument to show that in order for the court to attain an adequate readjustment of any delinquent it must take into consideration all the facts in the case; it must take into consideration the individual and his needs, and deal understandingly with the offender, as well as legally with his offense.

In the accomplishment of this function the court may employ certain tools—most important of which are probation and penal treatment.

In probation it possesses an agency of far reaching usefulness in this direction, whose capacity for effective service in readjusting human individuals, in restoring delinquents to the community, safe and free and capable of taking their part in the complex demands of social life, is scarcely realized; and yet the keenness, the sharpness and the efficiency of this tool can be dulled and impaired by improper use. For, with the opportunity to rehabilitate and readjust himself while on probation, there should go in the case of every delinquent an intelligent understanding of what is required to accomplish this rehabilitation.

The vital importance of the physical condition in this connection,

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particularly in relation to his economic efficiency, his ability to support himself, can not be overestimated. It needs little argument to show how exhausting physical diseases can so impair one's economic efficiency, so hamper one's ability to earn a living, as to render him a social misfit, causing him to drift from place to place, lowering his resistance to alcohol, drugs and such and, in short, bringing about the very conditions that probation should seek to prevent.

But that which is of most far reaching importance in this connection, is the necessity for seeing to it that the delinquent be not a danger to the community. Reference is made to certain communicable diseases, regarded as dangerous to the public health—from which offenders in court are commonly suffering. We refer to venereal disease, considered in many quarters as the most serious menace facing the human race. It is clearly the duty of those having to do with delinquents to see to it that these conditions are sought out and treated, if such individuals are to be returned to the community.

With the aim in view of showing the practical relationship of such facts, as those above mentioned, to the routine work of the court, the following study was undertaken.

Records of the last 1,000 cases examined were taken from the files, and the physical condition of each person noted, also the relationship which his physical condition bore—if any—to his economic efficiency. Case records of both men and women were included in this series.

Additional tables of a group of six hundred consecutive venereal studies are included.

The following table gives a general picture of the physical health of these 1,000 individuals. Those rated *good* were practically free from any condition that might impair health. Those rated *fair* were suffering from minor ailments of little consequence to general health, and produced very little impression on the physical strength of the individual. Those rated *poor* were sick people, and urgently in need of medical treatment. Those rated *bad* were emergency hospital cases.

TABLE I

*Showing Physical Condition of One Thousand Delinquents in Court*

Good physical condition.....	203
Fair physical condition.....	455
Poor physical condition.....	327
Bad physical condition.....	15

Six hundred and sixty-eight individuals, or 66.8% of our cases, were in good or fair health.

Three hundred and forty-two individuals, or 34.2%—one out of every three persons—was in poor or bad health, and in such physical condition as to warrant urgent medical treatment.

Just what relationship these figures bear to adult offenders as a whole, it is hardly safe to state. It is interesting however, in this connection to refer to a recent study of immoral women made by the writer, in which 44% of the women were in poor or bad physical condition from diseases other than venereal (tuberculosis, asthma, Bright's disease, heart disease, etc). Should anything like such findings be borne out in a study of other groups of adult offenders, then our above estimate among these 1,000 cases (34.2%) could hardly be considered extravagant.

Following is a partial list of the conditions from which these individuals were suffering:

TABLE II

*Showing a Partial List of Physical Conditions Other than Venereal Found Among One Thousand Delinquents*

Abscesses .....	25	Injuries and diseases of bones	
Skin diseases .....	150	and joints (arthritis, anky-	
Diseases of nervous system....	200	losis, fractures, and spinal	
Heart disease .....	100	curvature) .....	65
Bronchitis (acute and chronic)..	144	Arterio-sclerosis .....	30
Tuberculosis .....	25	Varicose veins .....	45
Pregnancy .....	28	Tumors .....	15
Pyorrhoea .....	50	Ulcers .....	20
Pelvic conditions in women		Carious teeth .....	150
(Salpingitis, uterine prolapse,		Defect and diseases of eye....	125
etc.) .....	26	Defective hearing .....	90
Thyroid disease .....	20	Laryngitis .....	25
Rhinitis .....	38	Tonsilitis .....	13
Enlarged tonsils .....	65	Stomatitis .....	10
Glandular enlargements .....	60	Bright's disease .....	7
		Paralysis .....	3

Other conditions such as hydrocele, rectocele, varicocele, cysts, etc., were found.

Something more than fatherly talks, intelligent advice, general supervision and securing employment is needed to solve the problem presented by the delinquent whose physical endurance is rapidly diminishing under a progressive Bright's disease or tuberculosis, or the delinquent who is scattering broadcast into the community syphilis and gonorrhea. These are conditions of which he may be entirely unaware, and yet which are of more vital importance to his future welfare and that of the community in which he lives than any other consideration.

Probably one of the most important measures utilized in rehabilitating the delinquent on probation is steady employment. The

following table will give some idea of how these 1,000 delinquents have demonstrated their ability in this direction.

TABLE III

*Showing Economic Efficiency of One Thousand Delinquents Seen in Court*

Regularly employed .....	243
Irregularly employed .....	383
Odd jobs .....	90
At home .....	146
Never worked .....	138

About 626 or 62.6% were considered self-supporting; while 374 or 37.4% were not self-supporting.

In this connection it is well to bear in mind that 65.8% of these 1,000 individuals were in good or fair health, and that 34.2% were in poor or bad health. Some correlation between the two seems evident. This is brought out more clearly and in detail in the following table:

TABLE IV

*Showing Relationship Between Physical Condition and Industrial Efficiency of One Thousand Delinquents*

	Regular	Irregular	At Home	No Work	Odd Jobs	Total
Good .....	121	68	11	1	2	203
Fair .....	114	262	37	18	24	455
Poor .....	8	53	95	111	60	327
Bad .....	0	0	3	8	4	15
Total .....	243	383	146	138	90	1,000

Thirty-five per cent of those found to be in good or fair physical condition had been steadily employed, while only 2% of those found to be in poor or bad physical condition had been steadily employed.

Eighty-five per cent of those found to be in good or fair physical condition had been and still were self-supporting, while only 18% of those found to be in poor or bad physical condition had been and were still self-supporting.

The chances for being self-supporting were more than four to one in favor of the individual in good physical condition.

Ninety-six per cent of those regularly employed were found in good or fair physical condition, while only 3% were found to be in poor or bad physical condition.

Eighty-six and three-tenths per cent of those who were rated as "never worked" were found to be in poor or bad physical condition, while only 13.7% were found to be in good or fair physical condition.

That there is a relationship, and a very definite one, between an individual's regularity of employment and his physical condition

seems to require no further argument. So high is this correlation that one can, without fear of denial, assert that really successful probation presupposes a knowledge of the physical condition of the delinquent in advance of his treatment. And further, really successful probation finds a rather close correlation between an individual's physical rehabilitation and his moral readjustment.

There is another and a darker side to this question, one which is of special importance to the court in fulfilling its protective function to the community—particularly in view of the recent stand taken by the national Government as to the seriousness of the menace which this condition referred to presents. We have in syphilis and gonorrhea two well recognized dangers to the health of the community—two diseases fraught with the most serious consequences to the individual and to the race.

Every effort of our national, state and local health authorities is now being bent in the direction of placing those infected under treatment.

It goes without saying that of all institutions, our courts, because of the very nature of their position in the community are not only willing, but anxious to co-operate in this direction.

With a view of determining the extent of the problem presented by these two diseases as found amongst delinquents in court, a group of six hundred (600) consecutive cases was gone over. The cases selected represented the average daily "run of the mine," inasmuch as it is the policy of the Medical Service of this Court to make a venereal study of every offender referred for examination, no matter whether there is any suspicion of past venereal infection or not.

The frequency with which these conditions were found among six hundred (600) individuals is shown in the following table:

TABLE V  
*Showing Frequency of Venereal Disease Among Six Hundred Delinquents*

Number of cases examined.....	600
Syphilis .....	182
Gonorrhea .....	133
Combined .....	32
Doubtful cases .....	27
Percentage of cases examined having venereal disease....	47

Forty-seven per cent of these individuals were suffering from one or both of these diseases. An additional 4.5% had doubtful bloods and smears. Practically every other person in this group had syphilis or gonorrhea, or both conditions. Without a routine medical examination there is no safe and sane method of determining in court whether an individual is free from venereal infection.

These conditions are not as is generally supposed, limited to purely chastity offenders; they are widely scattered among all classes of offenders. The following table will make this more clear.

TABLE V  
*Showing Venereal Disease as Related to Type of Offense Committed*

	Chastity	Drunk	Larceny	Possession of Drugs	Violation of Liquor Law	Bastardy Complaint	Stubborn Child	Neglect of Child	Assault and Battery	Arson	Total
.....	303	134	112	17	3	17	5	3	3	1	600
Syphilis .....	105	43	21	6	2	1	1	0	3	0	182
Gonorrhea .....	85	18	23	3	0	1	0	2	1	0	133
Combined .....	16	9	6	0	0	0	0	0	1	0	32
Total number venereal cases .....	174	52	38	9	2	2	1	2	3	0	283
Number doubtful cases.	15	15	0	1	0	1	0	0	0	1	27
Per cent of venereal cases .....	57.4	38.8	33.9	53							

Three hundred and three cases were so-called offenders against chastity; of these 57.4% were suffering from syphilis or gonorrhea or both. An additional 4.9% had doubtful bloods and smears.

There were 134 cases of drunkenness; 38.8% of these individuals had venereal disease; while an additional 6.5% were doubtful cases.

There were 112 cases of larceny; of these individuals 33.9%, or one out of every three cases had syphilis or gonorrhea or both.

There were 17 individuals arrested for possession of drugs, and 53% had venereal disease.

There were three arrested for violating the liquor law; two of whom had syphilis.

Three were arrested for assault and battery; all three had venereal disease.

In short, these conditions are not limited to any one special type of offender in court, but are found common among delinquents in general.

It is the size and extent as well as the seriousness of this problem to which we wish to call special attention. We are not dealing with a condition limited to the prostitute class; we are not dealing with a situation of merely secondary importance.

In syphilis and gonorrhea we have two diseases that are more far reaching in the consequences with which they threaten the individual and the race than any other menace. Those two conditions are found affecting all types of offenders seen in court. The gonorrheal prostitute is no more of a public danger than the syphilitic

barber, or the pugnacious restaurant cook arrested for assault and battery, who was found in the infectious stage of syphilis.

The problem is large enough and is serious enough to demand a broad and comprehensive policy on the part of our courts; a policy calling for a more routine investigation of the physical condition, and the possibilities of each offender prior to his disposition.

#### SUMMARY.

The original purpose of this study was to determine what part, if any, routine physical examination might play in the disposition of a delinquent's case in court, and later in the institution of reconstructive measures while on probation.

For this purpose the records of our last 1,000 cases were taken from the files, and the physical condition of each person noted; also the relationship which the physical condition bore, if any, to his economic efficiency.

Six hundred and fifty-eight individuals, or 65.8% of our cases, were in good or fair health; 342 individuals, or 34.2%—one out of every three persons—was in poor or bad health, and in such physical condition as to warrant urgent medical treatment.

About 626, or 62.6%, were considered self-supporting; while 374, or 37.4% were not self-supporting.

Some correlation between these figures is evident.

Thirty-five per cent of those found to be in good or fair physical condition had been steadily employed; while only 2% of those found to be in poor or bad physical condition had been found steadily employed.

Eighty-five per cent of those found to be in good or fair physical condition had been and still were self-supporting; while only 18% of those found to be in poor or bad physical condition had been and were still self-supporting. The chances for being self-supporting were more than four to one in favor of the individual in good physical condition.

Additional facts are included bearing upon the frequency of venereal disease among a group of 600 consecutive cases studied.

Forty-seven per cent of these individuals were suffering from one or both of these diseases; an additional 4.5% had doubtful bloods and smears.

Of these 600 case, 303 were so-called offenders against chastity; of these, 57.4% were suffering from syphilis or gonorrhea or both; while an additional 4.9% were doubtful cases.



There were 134 cases of drunkenness; 38.8% of these individuals had venereal disease; an additional 6.5% were doubtful cases.

There were 112 cases of larceny. Of these individuals 33.9%, or one out of every three cases, had syphilis or gonorrhea or both.

There were 17 individuals arrested for possession of drugs; 53% of these had venereal disease.

Other types of offenders in court showed a correspondingly high frequency of these conditions.

In short, the conclusion reached from this study is that venereal disease is not limited to any one type of special offender in court, but it is found common among all classes of delinquents; and that a policy calling for a more routine investigation of the physical condition and the possibilities of each offender, prior to his disposition, would seem justifiable.